## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Muil Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1459 Alexandria, Virginia 22313-1450

or Eax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blacks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new c maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: the Block 1 for any change of address)				Note: A certificate of mailing can only be used for demestic mailings of the Pen(a) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
486	2596 02/08/	2630	នន				
YOUNG & THOMPSON 209 Madison Street Suite 500				Certificate of Mailing or Transmission  I hereby certify that this Feed's Transmistal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop 18SUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.			
Alexandria, VA	22314					(Depositor's necus)	
						(moleoge?)	
						(Cots)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	SITA R	RNEY DOCKST NO.	CONFIRMATION NO.	
19/585,113 98/28/2086			Jacob van der Zavan		2001-1448	5094	
3773			10 1x	A BEARING AID TO GLA			
APELN, TYFE	emali. Entity	issue pee due	PUBLICATION FEE DUE	FREV PAID ISSUE FEE	TOTAL FEE(8) DUE	DATE DUE	
lanoisivosquon	<del>-No.</del> YES	<del>41410</del> \$755	\$300	\$0	siaio Sl	055 05/30/2010	
EXAM	NEX .	ART UNIT	CLASS-SUBCLASS				
DANG, HUNG XUAN		2873	351-111000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.353).</li> <li>Change of correspondence address (is Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication for "Fee Address" Indication form PTO/SB/47 (Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent from page, list  (1) the names of up to 3 registered patent attorneys or agents OR, siternatively.  (2) the name of a single firm thaving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
1. ASSIGNEE NAME AT PLEASE NOTE: Unk recordation as set fort (A) NAME OF ASSIC Varibel B.*	ess an assignee is identi vin 37 CFR 3.11. Comp iNEE		data will appear on the I a substitute for filing at (B) RESIDENCE: (CIT	• •	TRY)	ocument has been filed for	
Please check the appropri	ate assignee Category or	categories (will not be pr	inted on the patent): $- \zeta$	Hadividual 🚨 Corporat	ion or other private gro	supenity Deverament	
4a. The following fee(s) are submitted:  I same Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 2			<ul> <li>4b. Payment of Foots): (Please first reapply any previously paid issue for shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hearby authorized to charge the property fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 250120 (enclose an extra copy of this form).</li> </ul>				
Change in Entity Status (from status indicated above)     Q a. Applicant claims SMALL ENTITY status, Sec 37 CFR 1.27.			(if necessary)  It Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
***************************************	***************************************		***********		***************************************	e assignee or other party in	
Authorized Signature	1	Canded	Date May 3, 2010				
Typed or printed name Benoit Castel			Registration No. 35,041				
an ambication. Confidenti	iality is governed by 35 application form to the sis for reducing this bur riginia 22313-1450. DO	U.S.C. 122 and 37 CFR	1.14. Bus collection is a	stimated to take 12 minute	s to complete, includia	thy the USPTO to process) g gathering, preparing, and se you require to complete atment of Commerce, P.O. for Patents, P.O. Box 1450.	

Under the Paperwork Beduction Act of 1995, to persons are required to respond to a collection of information unless it displays a valid OMB control number.